



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT

**OIL AND GAS OPERATOR
OWNERSHIP AND CONTROL INFORMATION**

PLEASE TYPE OR PRINT

GENERAL OPERATOR INFORMATION		Enter the name and address under which you or your organization operate oil and gas wells in Pennsylvania which must be the same name as is providing the bond.			
Corporate, Company, Partnership or Registered Fictitious Name <i>Roulette Oil + Gas Co. LLC</i>		Type of Organization / Code <i>LLC</i>		Federal Tax ID# <i>45-3083756</i>	
Individual or Partner - Last Name <i>Reynolds</i>		First Name <i>James</i>		MI <i>W.</i>	Suffix
Mailing Address <i>1034 RT 44 N.</i>				<input checked="" type="checkbox"/> Check if this is a new address.	
City <i>Shinglehouse</i>		State <i>PA.</i>	ZIP+4 <i>16748</i>	Country (If Other Than USA) <i>Mckean</i>	
Phone (Daytime) <i>814-697-7891</i>		Ext.	FAX	Email Address <i>irgasmanpa@yahoo.com</i>	
Person to Contact - Last Name <i>Reynolds</i>		First Name <i>James</i>		MI <i>W.</i>	Suffix <i>managing partner</i>
<p>If the applicant is an individual or partnership operating under a name that is different than your full personal name, the name must be registered as a fictitious name with the Department of State. Please attach a copy of your APPROVED fictitious name registration. <input type="checkbox"/> Registration attached <input type="checkbox"/> Registration previously submitted and still active.</p>					
<p>If the applicant is a domestic or foreign corporation or limited liability company, it must be registered to conduct business in Pennsylvania with the Department of State. Please attach a copy of your APPROVED corporate registration or authorization to conduct business in Pennsylvania.</p> <p><input type="checkbox"/> Registration attached <input type="checkbox"/> Authorization to conduct business in PA attached <input type="checkbox"/> Registration previously submitted still active</p>					
<p>If the applicant has NO parent company, check the following box.</p> <p><input checked="" type="checkbox"/> No parent.</p> <p>If the applicant has a parent company, include the following information for the parent company: the name of the company, its address, phone number, taxpayer ID No., and state of incorporation, if the company is a corporation.</p> <p>Name _____ Phone No. () _____</p> <p>Address _____ Taxpayer ID No. _____</p> <p>_____ If corporation, state of incorporation _____</p>					

If the applicant has **NO subsidiaries**, indicate by checking the following box.

No subsidiary.

If the applicant has **one or more subsidiaries**, include the following information for each subsidiary company: the name of the company, its address, phone number, taxpayer ID No., and state of incorporation, if the company is a corporation.

Name _____ Phone No. (____) _____

Address _____ Taxpayer ID No. _____

_____ If corporation, state of incorporation _____

Name _____ Phone No. (____) _____

Address _____ Taxpayer ID No. _____

_____ If corporation, state of incorporation _____

Name _____ Phone No. (____) _____

Address _____ Taxpayer ID No. _____

_____ If corporation, state of incorporation _____

Name _____ Phone No. (____) _____

Address _____ Taxpayer ID No. _____

_____ If corporation, state of incorporation _____

Name _____ Phone No. (____) _____

Address _____ Taxpayer ID No. _____

_____ If corporation, state of incorporation _____

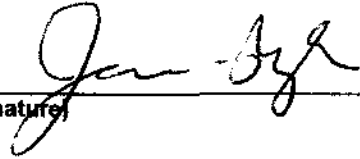
(Attach additional sheet, in the same format, if necessary.)

SIGNATURES

Under penalty of law, the undersigned hereby certify that they have the authority to submit this application on behalf of the applicant, that they have reviewed the information contained in this application and certify that the information is true and correct to the best of their knowledge and belief.

James W. Reynolds
(Print Name of Applicant)

James W. Reynolds managing partner
(Print Name & Title of Signatory)


(Signature)

Date MAY 27, 2022

Please call 717-772-2199 with any questions.

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU

Certificate of Organization
Domestic Limited Liability Company
(15 Pa.C.S. § 8913)

Name James W. Reynolds		
Address 1140 Route 44 South		
City Shinglehouse	State PA	Zip Code 16748

Commonwealth of Pennsylvania
CERTIFICATE OF ORGANIZATION 3 Page(s)



T1123665024

Fee: \$125

In compliance with the requirements of 15 Pa.C.S. § 8913 (relating to certificate of organization), the undersigned desiring to organize a limited liability company, hereby certifies that:

1. The name of the limited liability company (*designator is required, i.e., "company", "limited" or "limited liability company" or abbreviation*):

Roulette Oil & Gas Co., LLC

2. The (a) address of the limited liability company's initial registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is:

(a) Number and Street	City	State	Zip	County
1140 Route 44 South	Shinglehouse	PA	16748	Potter

(b) Name of Commercial Registered Office Provider	County
c/o:	

3. The name and address, including street and number, if any, of each organizer is (*all organizers must sign on page 2*):

Name	Address
James W. Reynolds	1140 Route 44 South, Shinglehouse, PA 16748

2011 AUG 23 PH 3: 30

PA DEPT OF STATE

4. *Strike out if inapplicable term*

A member's interest in the company is to be evidenced by a certificate of membership interest.

5. *Strike out if inapplicable:*

Management of the company is vested in a manager or managers.

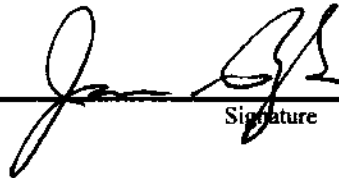
6. The specified effective date, if any is: August 2011
month date year hour, if any

~~7. *Strike out if inapplicable:* The company is a restricted professional company organized to render the following
restricted professional service(s)~~

8. For additional provisions of the certificate, if any, attach an 8½ x 11 sheet.

IN TESTIMONY WHEREOF, the organizer(s) has (have)
signed this Certificate of Organization this

22 day of August, 2011.



Signature

Signature

Signature

Date of this notice: 08-25-2011

Employer Identification Number:
45-3083756

Form: SS-4

Number of this notice: CP 575 B

ROULETTE OIL & GAS CO LLC
JAMES W REYNOLDS MBR
1140 ROUTE 44
SHINGLEHOUSE, PA 16748

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 45-3083756. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2012

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

